

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1		/				
2		/				
3		/				
4		/				
5		/				
6		/				
7		/				
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49		/				
50		/				
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	IND	DEP	IND	DEP	IND	DEP
51						
52						
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99		/				
100		/				
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
101		5				
102		5				
103		5				
104		5				
105		5				
106		5				
107		1				
108		1				
109		1				
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TOTAL IND.	5					
TOTAL DEP.	88					
TOTAL CLAIMS	93					

	IND	DEP	IND	DEP	IND	DEP
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						